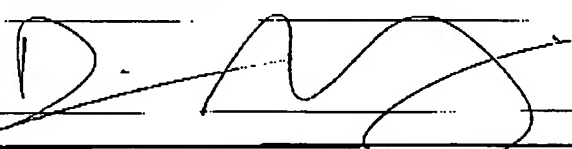
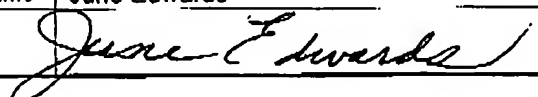


TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/006,098	RECEIVED CENTRAL FAX CENTER MAR 10 2005
	Filing Date	04Dec2001	
	First Named Inventor	Torri, Tonya et al.	
	Group Art Unit	2643	
	Examiner Name	Sams, Matthew	
Total Number of Pages in this Submission	12	Attorney Docket Number	CS01127

ENCLOSURES			(check all that apply)
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs Remarks _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	David S. Noskowicz	Registration No.	55,503
Signature			
Date	10 MAR 2005		

CERTIFICATE OF TRANSMITTAL/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to facsimile number 703-872-9306 or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date listed below:	
Typed or printed name	June Edwards
Signature	
Date	March 10, 2005

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Serial No. 09/968,650

Page 1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Torri, Tonya. et al.

EXAMINER: Sams, Matthew

SERIAL NO.: 10/006,098

GROUP: 2643

FILED: 04 December 2001

CASE NO.: CS11027

ENTITLED: USER INTERFACE FOR A HANDHELD WIRELESS
COMMUNICATION DEVICE

Motorola, Inc.
Intellectual Property Department
600 North U.S. Highway 45
Libertyville, IL 60048

REPLY AND AMENDMENT UNDER 37 C.F.R. § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Commissioner:

Responsive to the Office Action dated 27 December 2004, consideration of the following remarks and withdrawal of the outstanding objections and rejections is respectfully requested.

Please amend the above-referenced application as follows:

Amendments to the claims begin on page 2.

Remarks begin on page 9.